



# Spring Term 2018/19 After School Chess Club Killigrew Junior School



Name of Club: **The Checkmate Club of Killigrew**  
 Year Groups: **Inviting Years 3 / 4 / 5 / 6**  
 Day and Location: **THURSDAYS in the 5T Classroom**  
 Start Time/End Time: **15.30 pm to 16.30 pm**  
 Contact Name/Email/Tel: **Mo Jaufarally / [killigrew@thecheckmateclub.co.uk](mailto:killigrew@thecheckmateclub.co.uk) / 07786 326 927**  
 Cost: **£75 per Term + (£15 Admin ECF Registration for New Members Only)**  
 Payment Details: **CASH / Online Banking Details: Account Name: The Checkmate Club / Sort Code: 20-22-67 / Acc. No: 13374467 / Reference: Child's Name & School**

## Overview of Chess Club Dates

1 <sup>st</sup> Half-Term	No. of Sessions	Thursday	Reason for <b>no</b> Chess Club
Wk 1	1	10 Jan	
Wk 2	2	17 Jan	
Wk 3	3	24 Jan	
Wk 4	4	31 Feb	
Wk 5	5	07 Feb	
Wk 6		14 Feb	No Clubs – Parents Evening
Wk 7		21 Feb	Half Term

2 <sup>nd</sup> Half Term	No. of Sessions	Thursday	Reason for <b>no</b> Chess Club
Wk 8	6	28 Feb	
Wk 9	7	07 Mar	
Wk 10	8	14 Mar	
Wk 11	9	21 Mar	
Wk 12	10	28 Mar	
Wk 13		04 Apr	No clubs run-school request
Wk 14		11 Apr	Easter Holidays
Wk 15		18 Apr	Easter Holidays

## Information

Let our children learn the beautiful challenging game of chess where they will reap the benefits and carry it with them long after their childhood. As well as learning and playing chess, our children will be given exercise booklets which consists of chess puzzles at different levels. They will be required to practice the structured exercises at their own pace and will be marked. Certificates are given for every level passed. We hold ECF Graded Tournaments in the 2<sup>nd</sup> Half Term, therefore your child will need to be registered for Sept - July 2018/19. Engraved Trophy and Medals are awarded to the top three chess players to keep! 😊



Please complete the permission slip and return to the School Office with payment in an envelope marked with your child's name and club name. **PLEASE MAKE PAYMENT ONCE YOUR CHILD HAS A PLACE**

Name of Club: <b>THE CHECKMATE CLUB OF KILLIGREW - THURS – SPRING 2018/19 – NEW MEMBERS ONLY</b>		
Child's Name:		ECF Reg No:(if registered)
Date of Birth:	Year Group:	Class:
Address – 1 <sup>st</sup> line:	Town:	Post-code:
Name of Parent/Carer:		Email address of Parent/Carer:
Emergency Contact Number:		
Special Educational Needs:		
<b>Medical Conditions/Allergies:</b>		
Please contact me to discuss my child's medical needs and arrangements for their medicine. Please tick if required. <input type="checkbox"/>		
I understand it is my responsibility to ensure that my child remembers to attend the Club and make their way to the 5T Classroom; I will inform the Club leader if my child is unable to attend; If your child is not a new member and there are changes, it's your responsibility to inform us of the change; I understand no refunds will be given for non-attendance. I give permission for first name and photos taken to be uploaded on the Facebook Page: The Checkmate Club of Killigrew & Website: <a href="http://www.thecheckmateclub.co.uk">www.thecheckmateclub.co.uk</a> ; I allow my Year 6 child to walk home un-accompanied. <b>Please tick to confirm you understand and approve the above</b> <input type="checkbox"/>		